

# Nebraska Risk and Protective Factor Student Survey

Thank you for accepting the invitation to participate in this study. The questions contained in this booklet are designed to obtain your opinion about a number of things concerning you, your friends, your family, your neighborhood and your community. In a sense, many of your answers will count as “votes” on a wide range of important issues.

In order for this survey to be helpful, it is important that you answer each question as thoughtfully and honestly as possible. All of your answers will be kept strictly confidential, and will never be seen by anyone at your school. This study is completely voluntary, so you may skip any question you do not wish to answer.

Be sure to read the instructions below before you begin to answer. Thank you very much for being an important part of this survey.

## INSTRUCTIONS

1. This is not a test, so there are no right or wrong answers.
2. All of the questions should be answered by marking one of the answer spaces. If you do not find an answer that fits exactly, use the one that comes closest. If any question does not apply to you, or you are not sure of what it means, just leave it blank.
3. Your answers will be read automatically by a machine called an “Optical Mark Reader.” Please follow these directions carefully:

- Use a **No. 2** pencil.
- Make heavy black marks inside the ovals.
- **Erase cleanly** any answer you wish to change.
- Make **no other markings** on the survey pages, since they interfere with the automatic reading.
- **DO NOT** write your name anywhere on this booklet.

**This kind of mark will work:**

**Correct Mark**



**These kinds of marks will NOT work:**

**Incorrect Marks**



## DEMOGRAPHICS AND SCHOOL CLIMATE

The person administering this survey will provide letters and numbers to you. Please write the letters and numbers in the spaces provided, and then darken the ovals corresponding to those letters and numbers.

[illegible]

PLEASE DO NOT WRITE IN THIS AREA



1. How old are you?

- ☐ 10    ☐ 11    ☐ 12    ☐ 13    ☐ 14  
☐ 15    ☐ 16    ☐ 17    ☐ 18    ☐ 19 or older

2. What grade are you in?

- ☐ 6th    ☐ 8th    ☐ 10th    ☐ 12th

3. Are you:    ☐ Female    ☐ Male

4. Are you Hispanic or Latino?

- ☐ Yes (Hispanic or Latino)  
☐ No (Not Hispanic or Latino)

5. What is your race? (Select one or more)

- ☐ Black or African American  
☐ Asian  
☐ American Indian  
☐ Native Hawaiian or Other Pacific Islander  
☐ Alaska Native  
☐ White  
☐ Other (Please specify) \_\_\_\_\_

6. Where are you living now?

- ☐ On a farm or a ranch  
☐ In the country, not on a farm or ranch  
☐ In a city, town, or suburb  
☐ On a reservation

7. In my school, students have lots of chances to help decide things like class activities and rules.

- ☐ NO!    ☐ no    ☐ yes    ☐ YES!

8. Teachers ask me to work on special classroom projects.

- ☐ NO!    ☐ no    ☐ yes    ☐ YES!

9. There are a lot of chances for students in my school to get involved in sports, clubs, and other school activities outside of class.

- ☐ NO!    ☐ no    ☐ yes    ☐ YES!

10. There are lots of chances for students in my school to talk with a teacher one-on-one.

- ☐ NO!    ☐ no    ☐ yes    ☐ YES!

11. I have lots of chances to be part of class discussions or activities.

- ☐ NO!    ☐ no    ☐ yes    ☐ YES!

12. How often do you feel that the schoolwork you are assigned is meaningful and important?

- ☐ Never    ☐ Seldom    ☐ Sometimes    ☐ Often    ☐ Almost Always

13. How interesting are most of your courses to you?

- ☐ Very interesting and stimulating    ☐ Fairly interesting    ☐ Very Dull  
☐ Quite interesting    ☐ Slightly dull

14. How important do you think the things you are learning in school are going to be for your later life?

- ☐ Very important    ☐ Fairly important    ☐ Not at all important  
☐ Quite important    ☐ Slightly important

15. Now thinking back over the past year in school, how often did you:

	Almost always	Often	Sometimes	Seldom	Never
a. enjoy being in school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. hate being in school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. try to do your best work in school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## HEALTH & SAFETY

16. How old were you when you first:

	17 or Older	16	15	14	13	12	11	10 or Younger	Never Have
a. smoked marijuana?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. smoked a cigarette, even just a puff?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. had more than a sip or two of beer, wine, or hard liquor (for example vodka, whiskey, or gin)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. began drinking alcoholic beverages regularly that is, at least once or twice a month?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. used "meth" (also known as 'crank', 'crystal', or 'ice')?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. got suspended from school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. got arrested?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. carried a handgun?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. attacked someone with the idea of seriously hurting them?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. belonged to a gang?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

17. How wrong do you think it is for someone your age to:

	Not Wrong at All	A Little Bit Wrong	Wrong	Very Wrong
a. take a handgun to school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. steal anything worth more than \$5.00?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. pick a fight with someone?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. attack someone with the idea of seriously hurting them?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. stay away from school all day when their parents think they are at school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. drink beer, wine, or hard liquor (for example, vodka, whiskey, or gin) regularly (at least once or twice a month)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. smoke cigarettes?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. smoke marijuana?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. use "meth" (also known as 'crank', 'crystal', or 'ice')?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. use LSD, cocaine, or another illegal drug?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



## GAMBLING

17 or Older	
16	
15	
14	
13	
12	
11	
10 or Younger	
Never Have	

31. How old were you the first time you gambled (bet money or something of value on sports, a game of chance or skill, played the lottery, or bet cards or dice games)?

32. In the past year, have you gambled for money or anything of value?

☐ Yes ☐ No

33. In the last 30 days, have you gambled for money or anything of value?

☐ Yes ☐ No

34. In the past year, have you often found yourself thinking about gambling or planning to gamble?

☐ Yes ☐ No

35. In the past year, have you ever spent more than you meant to on gambling?

☐ Yes ☐ No

36. In the past year, has your gambling ever led to lies to your family?

☐ Yes ☐ No

## DRUG/ALCOHOL USAGE

37. Have you ever used smokeless tobacco (chew, snuff, plug, dipping tobacco, or chewing tobacco)?

☐ Never ☐ Regularly in the past  
☐ Once or twice ☐ Regularly now  
☐ Once in a while but not regularly

38. How frequently have you used smokeless tobacco during the past 30 days?

☐ Never ☐ About once a day  
☐ Once or twice ☐ More than once a day  
☐ Once or twice a week

39. Have you ever smoked cigarettes?

☐ Never ☐ Regularly in the past  
☐ Once or twice ☐ Regularly now  
☐ Once in a while but not regularly

40. How frequently have you smoked cigarettes during the past 30 days?

☐ Not at all  
☐ Less than one cigarette per day  
☐ One to five cigarettes per day  
☐ About one-half pack per day  
☐ About one pack per day  
☐ About one and one-half packs per day  
☐ Two packs or more per day

41. On how many occasions have you had beer, wine, or hard liquor to drink in your lifetime (more than just a few sips)?

☐ 0 - occasions ☐ 10 - 19 occasions  
☐ 1 - 2 occasions ☐ 20 - 39 occasions  
☐ 3 - 5 occasions ☐ 40 or more occasions  
☐ 6 - 9 occasions

42. On how many occasions (if any) have you had beer, wine, or hard liquor during the past 30 days?

☐ 0 - occasions ☐ 10 - 19 occasions  
☐ 1 - 2 occasions ☐ 20 - 39 occasions  
☐ 3 - 5 occasions ☐ 40 or more occasions  
☐ 6 - 9 occasions

43. Think back over the last two weeks. How many times have you had five or more alcoholic drinks in a row?

☐ None ☐ 3 - 5 times  
☐ 1 time ☐ 6 - 9 times  
☐ 2 times ☐ 10 or more times

44. On how many occasions (if any) have you used marijuana in your lifetime?

☐ 0 - occasions ☐ 10 - 19 occasions  
☐ 1 - 2 occasions ☐ 20 - 39 occasions  
☐ 3 - 5 occasions ☐ 40 or more occasions  
☐ 6 - 9 occasions

45. On how many occasions (if any) have you used marijuana during the past 30 days?

☐ 0 - occasions ☐ 10 - 19 occasions  
☐ 1 - 2 occasions ☐ 20 - 39 occasions  
☐ 3 - 5 occasions ☐ 40 or more occasions  
☐ 6 - 9 occasions

46. On how many occasions (if any) have you used LSD or other psychedelics in your lifetime?

☐ 0 - occasions ☐ 10 - 19 occasions  
☐ 1 - 2 occasions ☐ 20 - 39 occasions  
☐ 3 - 5 occasions ☐ 40 or more occasions  
☐ 6 - 9 occasions

47. On how many occasions (if any) have you used LSD or other psychedelics during the past 30 days?

☐ 0 - occasions ☐ 10 - 19 occasions  
☐ 1 - 2 occasions ☐ 20 - 39 occasions  
☐ 3 - 5 occasions ☐ 40 or more occasions  
☐ 6 - 9 occasions

48. On how many occasions (if any) have you used cocaine or crack in your lifetime?

☐ 0 - occasions ☐ 10 - 19 occasions  
☐ 1 - 2 occasions ☐ 20 - 39 occasions  
☐ 3 - 5 occasions ☐ 40 or more occasions  
☐ 6 - 9 occasions

49. On how many occasions (if any) have you used cocaine or crack during the past 30 days?

☐ 0 - occasions ☐ 10 - 19 occasions  
☐ 1 - 2 occasions ☐ 20 - 39 occasions  
☐ 3 - 5 occasions ☐ 40 or more occasions  
☐ 6 - 9 occasions



63.If you smoked a cigarette in the past year, think about the last time you did so. At that time, how did you get the cigarette? (Check YES or NO for each. If you did not smoke a cigarette in the past year, check DID NOT USE for each one).

The last time I smoked a cigarette . . .

- a. I bought it myself with a fake ID  
b. I bought it myself without a fake ID  
c. I got it from someone I know aged 18 or older  
d. I got it from someone I know under age 18  
e. I got it from a brother or sister  
f. I got it from home with my parents' permission  
g. I got if from home without my parents' permission  
h. I got it from another relative  
i. A stranger bought it for me  
j. I took it from a store or shop  
k. I got it from a vending machine  
l. Other

Yes	No	DID NOT USE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

64.And at the time you last smoked a cigarette in the past year, where were you when you smoked it? (Check YES or NO for each. If you did not smoke a cigarette in the past year, check DID NOT USE for each one).

On the last day I smoked a cigarette, I was . . .

- a. at my home  
b. at someone else's home  
c. at an open area like a park, beach, back road, or a street corner  
d. at a sporting event or concert  
e. at a restaurant, bar or a nightclub  
f. at an empty building or a construction site  
g. at a hotel/motel  
h. in a car

Yes	No	DID NOT USE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

65.On the last day you smoked a cigarette, were there one or more adults present?

☐ Yes ☐ No

### COMMUNITY-BASED PERCEPTIONS

66.If you wanted to get some beer, wine, or hard liquor (for example, vodka, whiskey, or gin) how easy would it be for you to get some?

☐ Very hard ☐ Sort of easy  
☐ Sort of hard ☐ Very easy

67.If you wanted to get some cigarettes, how easy would it be for you to get some?

☐ Very hard ☐ Sort of easy  
☐ Sort of hard ☐ Very easy

68.If a kid smokes marijuana in your neighborhood, or the area around where you live, would the police catch him or her?

☐ NO! ☐ no ☐ yes ☐ YES!

69.If you wanted to get drugs like cocaine, LSD, or "meth", how easy would it be for you to get some?

☐ Very hard ☐ Sort of easy  
☐ Sort of hard ☐ Very easy

70.If a kid drank some beer, wine, or hard liquor (for example, vodka, whiskey, or gin) in your neighborhood, or the area around where you live, would he or she be caught by the police?

☐ NO! ☐ no ☐ yes ☐ YES!

71.If you wanted to get a handgun, how easy would it be for you to get one?

☐ Very hard ☐ Sort of easy  
☐ Sort of hard ☐ Very easy

72.If a kid carried a handgun in your neighborhood, or the area around where you live, would he or she be caught by the police?

☐ NO! ☐ no ☐ yes ☐ YES!

73.If you wanted to get some marijuana, how easy would it be for you to get some?

☐ Very hard ☐ Sort of easy  
☐ Sort of hard ☐ Very easy

74.If a kid smoked cigarettes in your neighborhood, or the area around where you live, would he or she be caught by the police?

☐ NO! ☐ no ☐ yes ☐ YES!

75.How wrong would most adults in your neighborhood, or the area around where you live, think it is for kids your age:

Not Wrong at All
A Little Bit Wrong
Wrong
Very Wrong

- a. to use marijuana?  
b. to drink alcohol?  
c. to smoke cigarettes?  
d. to use "meth"?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

76.There are lots of adults in my neighborhood I could talk to about something important.

☐ NO! ☐ no ☐ yes ☐ YES!

77.How much does each of the following statements describe your neighborhood, or the area around where you live?

- a. crime and/or drug selling  
b. fights  
c. lots of empty or abandoned buildings  
d. lots of graffiti

NO!	no	yes	YES!
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



